| Application or | -Docket | Number |
|----------------|---------|--------|
|----------------|---------|--------|

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |              |                                |                      | SMALL ENTITY TYPE |                     | OR           | OTHER THAN OR SMALL ENTITY |                     |             |                        |
|---|---|---|--------------|--------------------------------|----------------------|-------------------|---------------------|--------------|----------------------------|---------------------|-------------|------------------------|
| TOTAL CLAIMS  |   | 9   |              |                                |                      | ſ                 | RATE                | FEE          |                            | RATE                | FEE         |                        |
| FOR   |   |   | NUMBER FILED |                                | NUMBER EXTRA         |                   |                     | BASIC FEE    | 385.00                     | OR                  | BASIC FEE   | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | 9 minus 20=  |                                | •                    |                   |                     | XS 9=        |                            | OR                  | X\$18=      |                        |
| INDEPENDENT CLAIMS  |   |   | 5 mi         | nus 3 =                        | * 2                  |                   |                     | X43=         |                            | OR                  | X86=        | nz                     |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |              |                                |                      |                   |                     | +145=        |                            | OR                  | +290=       |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |   |   |              |                                |                      | Ļ                 | TOTAL               |              | OR                         | TOTAL               |             |                        |
| CLAIMS AS AMENDED - PART II   |   |   |              |                                |                      |                   |                     | OTHER THAN   |                            |                     |             | THAN                   |
| (Column 1)  |   |   |              | (Colur                         |                      | (Column 3)        | 9                   | SMALL E      | NTITY                      | OR                  | SMALL       |                        |
| AMENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIC<br>PAID | BER<br>OUSLY         | PRESENT<br>EXTRA  |                     | RATE         | ADDI-<br>TIONAL<br>FEE     |                     | RATE        | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |                      | =                 |                     | X\$ 9=       |                            | OR                  | X\$18=      |                        |
|   | Independent   | *   | Minus        | ***                            | - CL A184            | =                 |                     | X43=         |                            | OR                  | X86=        |                        |
|   |   | NTATION OF MU                             | JUIPLE DEF   | ENDENI                         | CLAIM                |                   | 1                   | +145=        |                            | OR                  | +290=       |                        |
| 1, 3,5,4,7  |   |   |              |                                |                      | <u> </u>          | TOTAL<br>ODIT. FEE  |              | OR                         | TOTAL<br>ADDIT. FEE |             |                        |
|   |   | (Column 1)                                |              | (Colur                         | nn 2)                | (Column 3)        | _ ′                 |              |                            |                     |             |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY         | PRESENT<br>EXTRA  |                     | RATE         | ADDI-<br>TIONAL<br>FEE     |                     | RATE        | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |                      | =                 |                     | X\$ 9=       |                            | OR                  | X\$18=      |                        |
|   | Independent   | *   | Minus        | ***                            |                      | =                 |                     | X43=         |                            | OR                  | X86=        |                        |
|   | FIRST PRESE   | NTATION OF MU                             | JLTIPLE DEF  | ENDENT                         | CLAIM                |                   |                     | +145=        |                            | OR                  | +290=       |                        |
|   |   |   |              |                                |                      | Ŀ                 | TOTAL<br>ADDIT. FEE |              | OR                         | TOTAL<br>ADDIT, FEE |             |                        |
|   |   | (Column 1)                                |              | (Colur                         | mn 2)                | (Column 3)        |                     | ODII. I CE E |                            | •                   | ADDIT: I EL |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID  | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA  |                     | RATE         | ADDI-<br>TIONAL<br>FEE     |                     | RATE        | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |                      | =                 |                     | X\$ 9=       |                            | OR                  | X\$18=      |                        |
|   | Independent   | *   | Minus        | ***                            |                      | =                 | <b>∄</b>            | X43=         |                            | OR                  | X86=        |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                |                      | +145=             |                     | OR           | +290=                      |                     |             |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |   |              |                                |                      | L                 | TOTAL               |              | OR                         | TOTAL               |             |                        |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                                |                      |                   |                     |              |                            |                     |             |                        |